



# REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4806 (R13/11-05)

Indiana Election Commission (IC 3-9-5-14)

## (CFA-4) Summary Sheet

FILE NUMBER

490854

TOTAL PAGES IN ENTIRE CFA-4 REPORT

2

**INSTRUCTIONS:** Please type or print legibly **IN BLACK INK** all information on this form. For assistance in completing this form, see instructions on the reverse side.

IS THIS AN AMENDMENT? ☐ Yes ☒ No

## COMMITTEE INFORMATION

1. Full Name of Committee (as on Statement of Organization) ☐ Check if this is a new name

I.A.T.S.E. LOCAL 30 POLITICAL ACTION COMMITTEE

2. Acronym or Abbreviated Name (if any)

3. Committee Telephone Number

( 317 ) 638-3226

4. Mailing Address (address where all campaign finance correspondence is received)

☐ Check if this is a new address

1407 E.RIVERSIDE DRIVE

5. City, State, ZIP Code

INDIANAPOLIS, IN 46202-2037

6. Party Affiliation (if applicable)

## CANDIDATE INFORMATION (For Candidate's Committees Only)

7. Full Name of Candidate (include any nickname)

8. Party Affiliation or If Independent Candidate

9. Office Sought (Include district number, if any. Not required for exploratory committee.)

10. County of Residence

## TYPE OF REPORT

## CONVENTION CANDIDATES ONLY

11. Check one:

☒ Pre-Primary ☐ Pre-Election ☐ Annual ☐ Nomination ☐ Other☐ Final/Disbands Committee (lines 18, 19, and 20 must be "0") ☐ Outgoing Treasurer (within 10 days amend Statement of Organization)

Check one:

☐ Pre-Convention☐ Post-Convention

12. Reporting Period:

From: 1/1/2011

Through: 4/8/2011

COLUMN A  
This PeriodCOLUMN B  
Year to Date

13. Cash on hand and investments at the beginning of this reporting period.

3990.56

14. Cash on hand and investments January 1, current year.

3990.56

## CONTRIBUTIONS AND RECEIPTS

(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)

15a. Itemized (use Schedule A)

15b. Unitemized

15c. Add lines 15a and 15b in both columns

SUBTOTAL

16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B

TOTAL

78

78

4068.56

78

4068.56

## EXPENDITURES

(Note: These amounts include in-kind expenditures and loan repayments.)

17a. Itemized (use Schedule B) (Public Question: use Schedule C)

17b. Unitemized

17c. Add lines 17a and 17b in both columns

SUBTOTAL

18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)

TOTAL

19. Debts OWED BY the committee (use Schedule D)

20. Debts OWED TO the committee (use Schedule E)

1200

APR 14 2011

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## CERTIFICATION

I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.

Signature of Treasurer

Title

TREASURER

Date

4/13/11

Signature of Candidate (if applicable)

Date

FOR OFFICE USE ONLY

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**WARNING:** Any information contained in this report may not be copied for sale or used for any commercial purpose. (IC 3-9-4-5) A person who knowingly files a fraudulent report commits a Class D felony. (IC 3-14-1-13) A person who fails to file a complete or accurate report as required by the Indiana



## REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05)  
Indiana Election Commission (IC 3-9-5-14)

**(CFA-4 SCHEDULE D)**  
**DEBTS OWED BY THIS COMMITTEE**

**INSTRUCTIONS:** Please type or print legibly in **BLACK INK** all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount, **OWED BY** the committee during the reporting period. Include all amounts owed for to or lend institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the **ENDORSER'S** column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

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CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS <i>(street number, city, state, ZIP code)</i>	ENDORSEE'S OR VENDOR'S NAME & MAILING ADDRESS (if any) <i>(street number, city, state, ZIP code)</i>	AMOUNT	DATE DEBT INCURRED	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
		NATURE OF DEBT			
IATSE LOCAL 30 1407 E. RIVERSIDE DRIVE INDIANAPOLIS, IN 46202		\$1,500.00	10/17/95	0	1200
LENDER'S OCCUPATION:		PROMISSORY NOTE			
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
SUBTOTAL THIS PAGE OF SCHEDULE D					\$1,200.00
TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY <i>(Enter total on ITEM 19 of the Summary Sheet)</i>					\$1,200.00

1407 E. Riverside Drive  
Indianapolis, IN 46202  
Phone: 317-638-3226  
Fax: 317-638-6126

**IATSE, Local 30 PAC**

# Fax

**To:** Marion County Election Board

**From:** Ken Bandy

**Fax:** 317-327-4815

**Date:** April 13, 2011

**Phone:** 317-327-4740

**Pages:** 3

**Re:** CFA-4 for PAC 490854

**CC:**

( Urgent

( For Review

( Please Comment

( Please Reply

( Please Recycle

**•Comments:**

Please confirm your receipt of this report by faxing back to the attention of Ken Bandy at 317-638-6126.

Thanks.



*Elizabeth J. White*

APR 14 2011

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